2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# L03000056310

Entity Name: CHARLOTTE WELL DRILLING, L.L.C.

Current Principal Place of Business:

1160 BUENA VISTA CIRCLE
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

Current Mailing Address:

1160 BUENA VISTA CIRCLE
PORT CHARLOTTE, FL 33953

New Mailing Address:

P. O. BOX 381252
MURDOCK, FL 33938

FEI Number: 52-2436480 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LABROSSE, SHELDON
1160 BUENA VISTA CIRCLE
PORT CHARLOTTE, FL 33953

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition
Name: LABROSSE, SHELDON L MGRM
Address: 17463 TERRY AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM ( ) Change (X) Addition
Name: LABROSSE, MARIE C MGRM
Address: 17463 TERRY AVENUE
City-St-Zip: PORT CHARLOTTE, FL 33948

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHELDON LABROSSE MGRM 04/14/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date